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| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/814,436 |
| | Filing Date | March 31, 2004 |
| | First Named Inventor | Kevin Conwell |
| | Art Unit | 1771 |
| | Examiner Name | Daniel R. Zirker |
| | Attorney Docket Number | 481062.412 |

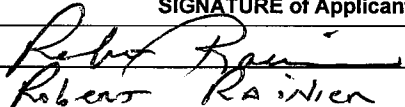
I hereby revoke all previous powers of attorney given in the above-identified application.

| | |
|---|--|
| <input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners at Customer Number: 35243 | |
| <input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to: <input checked="" type="checkbox"/> The address associated with Customer Number 35243 | |

| | | | | | |
|--|--|-------|--|-----|--|
| OR | | | | | |
| <input type="checkbox"/> Firm or Individual Name | | | | | |
| Address | | | | | |
| City | | State | | Zip | |
| Country | | | | | |
| Telephone | | Email | | | |

I am the:

- ☐ Applicant/Inventor.
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
☒ As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71,
 to prosecute the application to the exclusion of the inventor(s).

| SIGNATURE of Applicant or Assignee of Record | | | |
|--|---|------|-------------------------|
| Signature |  | Date | December 1, 2006 |
| Name | Robert R. Rainier | | |
| Title and Company (Assignee) | Vice President Intermec IP Corp. | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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